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DECLARATION — Utility or Design Patent Application								
	Customer Nu or Bar Code				OR X	Correspondence address below		
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City Chicago,				State	IL	60611 ZIP		
USA		Telephor		/222-9	350	312/527-0484 Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
· · · · · · · · · · · · · · · · · · ·				-	mily Name Wardrop Sumame			
Inventor's Signature			,			Date		
Residence: City Lakeville			State	AN .	Country USA	Citizenship		
Mailing Address 17328 Ju	ıdicial	Road						
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City Lakeville	State	MN		ZIP	55044	USA		
NAME OF SECOND INVENTOR:     A petition has been filed for this unsigned inventor								
Given Name Stephen W. Family Name Fuchs (first and middle [if any]) or Surname					chs			
Inventor's Signature						Date		
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City Victoria	State	MN		ZIP	55386	Country US		
Additional inventors are being named	on the	suppleme	ental Additio	nal Inven	tor(s) sheet(s) PT	O/SB/02A attached hereto.		

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DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1 63)

Please type a plus sign (+) inside this box  $\longrightarrow$  X

☑ Declaration Submitted with Initial Filing

☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number		10001-29152			
First Named Inventor		Andrew J. Wardrop			
COMPLETE IF KNOWN					
Application Number					
Filing Date	November 30, 2000				
Group Art Unit	Unknown				
Examiner Name	Unknown				

As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
Apparatus and Method for GPS Based Digital Compensation of Radio Frequencies.							
(Title of the Invention)							
is attached hereto							
or as United States Application Number or PCT International was filed on (MM/DD/YYYY)							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			
			. 0000				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s)	Filling Dat	e (MM/DD/YYYY)	numbers supplem	al provisional application are listed on a ental priority data sheet 02B attached hereto.			

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